

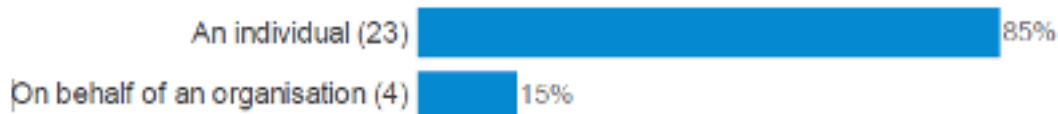
Care Act Policy Framework Consultation Results

This report was generated on 02/03/15, giving the results for 27 respondents.
A filter of 'All Respondents' has been applied to the data.

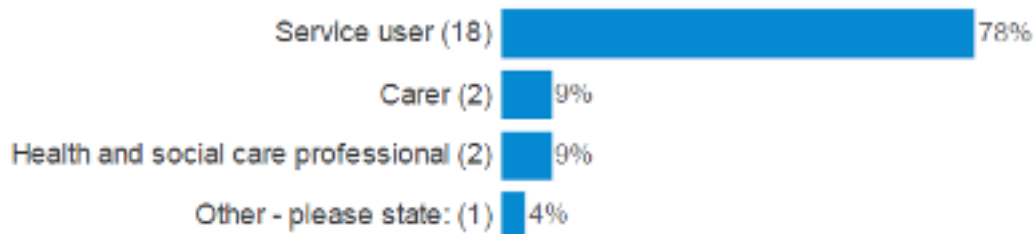
Section 1: about you

Please tell us a little bit more about you. This will help us make sure we have considered the views of a wide range of people. If you are completing this as a family carer, please provide the details of the person you are caring for.

Are you replying as:

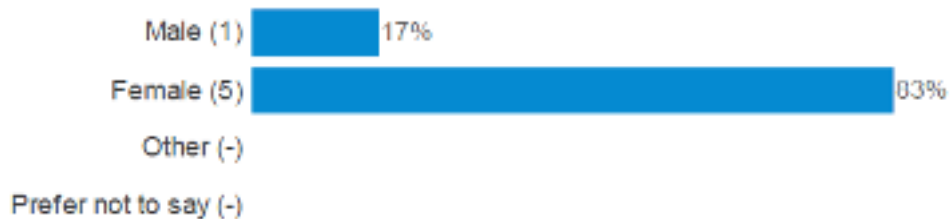


Are you a:

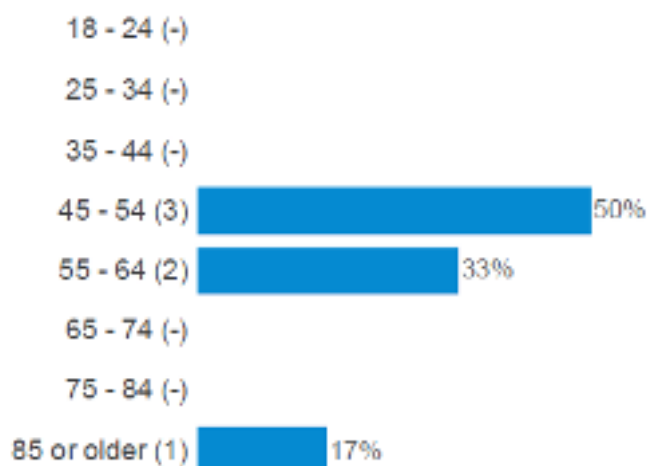


I work for an organisation that supports carers

Are you:

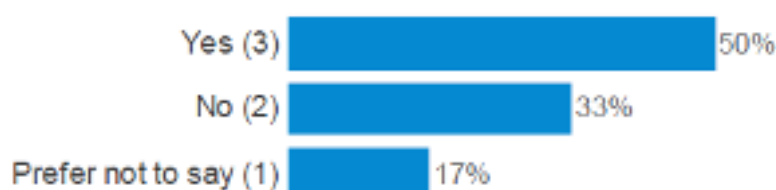


Age of respondent:



Prefer not to say (-)

Do you have any longstanding health conditions and / or a disability?



Section 2: The Council's responsibility for shaping the care market and provider failure

The Care Act places new responsibilities on local authorities to support and “shape” their market for adult care and support as a whole, so that it meets the needs of all people in their area who need care and support, whoever arranges and funds it.

Provider failure occurs when a provider is unable to exercise its normal day-to-day duties, due to a specific set of circumstances, such as the appointment of an administrator or an application for bankruptcy is filed. The Council's Market Shaping and Provider Failure policy statement emphasises the new duties to shape and influence the local care market, and explains how and under what circumstances, the Council should intervene as a result of provider failure.

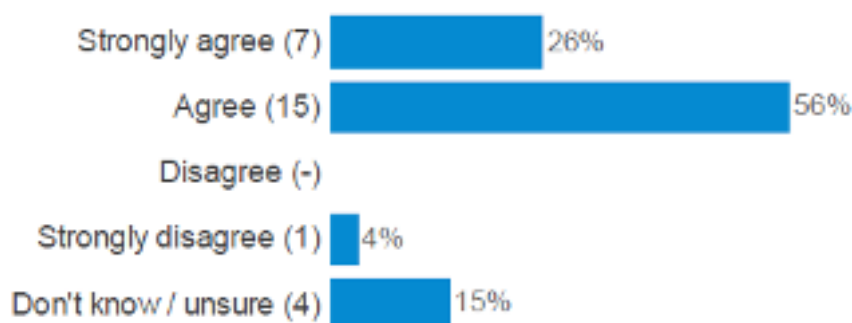
Our statement contains a new charging policy that would be applied in two very specific circumstances following provider failure. These are:

- When the Council is arranging alternative services for someone who is receiving care that is funded by another local authority. In this event, the funding authority would be charged the cost of arranging the alternative care.
- When the Council is being asked to arrange alternative services for someone who is funding the costs of their own care. In this event, the individual making the request would be charged the cost of arranging the alternative care.

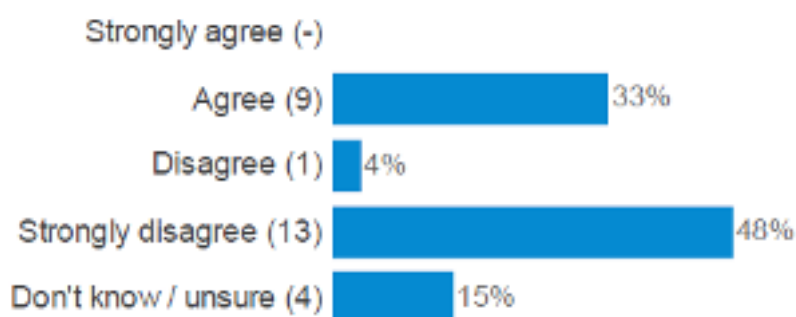
Our aim for both cases is that there should be no additional cost to the local tax payer when exercising these new duties.

[Click here to view more information on this section, what the policy is, and what it means.](#) It is helpful to read this before answering the questions below.

To what extent do you agree that people who fund 100% of their own care should be able to ask local authorities to help them arrange alternative care in the event of provider failure?



Do you agree with the proposal that the Council should be able to charge for this service to ensure that there is no cost to the local tax payer?



If you have any comments on this section of the draft policy, please provide them below:

- Patients care needs fluctuate depending on the acuity of their physical/mental health, their environment, personal support systems - care providers may fail to provide a level of safe and appropriate care at times of crisis. Therefore a contingency plan must be in place for this patient group, otherwise no statutory agency accepts a duty of care. Clear arrangements for self-funding this plan must be discussed and signed off by both parties at the earliest opportunity.
- It needs to be clear that costs would be kept to a minimum and comparable/better accommodation would be offered. Some people will have sold their homes and liquidated any assets to fund private care, it's not necessarily just privileged wealthy funding fees from income only. It is a time of vulnerability and fragility and needs prompt, proactive and careful management as it is like moving house. It comes with risk, uncertainty and apprehension, but without all of the choices.
- Provider failure is likely to be a time of high stress and urgency, with limited provider capacity at least in the short term. Individuals self-funding their care needs will feel particularly vulnerable. The Council's policy makes care and administration charges clear.

Section 3: Financial Assessment and Charging for Service Users

The current legal framework enables local authorities to financially assess people needing care and support. From this we can decide to request a request a contribution towards service costs where they can afford it.

The assessment process is one of the most important elements of the care and support system. The process focuses on the individual and their needs throughout - involving and supporting them to have choice and control over their future.

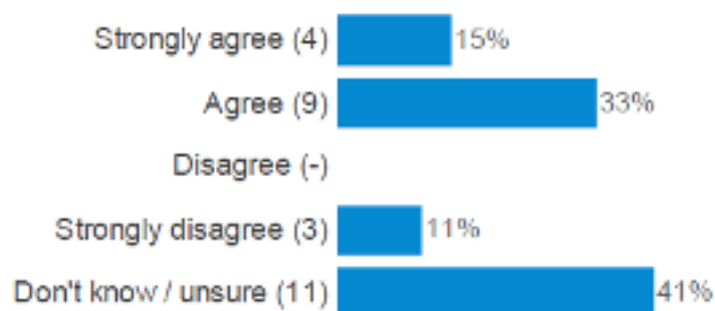
Building on the Care Act guidance issued in late October 2014, our Policy Statement contains two minor amendments to the existing contributions policy. These are:

- To apply charges from the start of a service, rather than the date the financial assessment is completed.
- To apply an administration fee when arranging care for people who have been financially assessed to pay 100% of their care costs.

[Click here to view more information on this section, what the policy is, and what it means.](#) It is helpful to read this before answering the questions below.

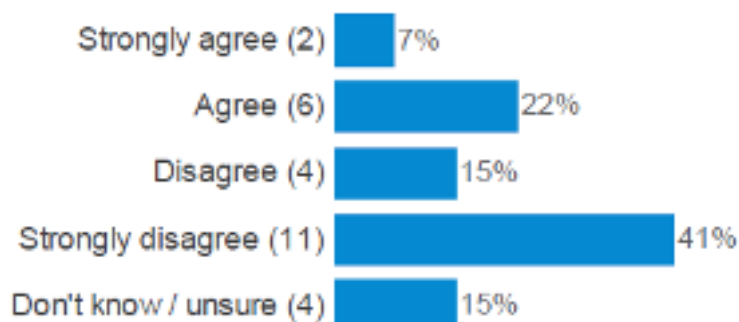
Firstly, we would like you to consider those who have been assessed as being able to pay for some or all of their care costs:

To what extent do you agree that charges for these people should begin at the same time that their care begins?



Now we would like you to consider those who have been assessed as being able to pay for all of their care costs:

How far do you agree that the Council should apply an administration fee when arranging care to ensure that there is no cost to the local taxpayer?



If you have any comments on this section of the draft policy, please provide them below:

- Budgets are constrained, resources are finite and users have to understand this and accept a level of responsibility
- I do think you should charge but it should be a reasonable amount
- Any admin fee would have to be minimal - under £100
- Arranging care carries a cost, whether undertaken by the council or a Third Party. Costs should be transparent, proportionate and competitive; and not levied if the council is not asked to arrange care. The policy is clear about this and it's professionals will need to explain it. However, this is related to market shaping, to provide people with care needs and their carers with real choice.

Section 4: Deferred Payments

A "deferred payment" is a type of financial arrangement between the Council and someone who required permanent residential or nursing care who has been assessed as being able to pay for all of their care costs.

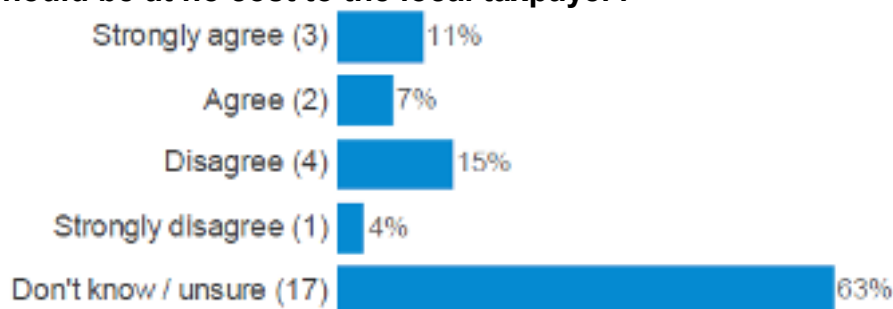
It means that the Council will pay for care and support initially, but places a charge against an individual's home - to be repaid when the property is sold. The government's goal here is to ensure that no one should be forced to sell their home in their lifetime to pay for their care.

Our "deferred payment" Policy has been updated to make sure it matches the new Care Act. The aim is to provide clear guidance to the public and staff explaining how the scheme works and under what circumstances a deferred payment might be available, and the charges that would be incurred by the recipient - we could need to agree on:

- An independent property / asset valuation.
- An interest rate charge.

[Click here to view more information on this section, what the policy is, and what it means.](#) It is helpful to read this before answering the questions below.

To what extent do you agree that the Council's deferred payment scheme should be at no cost to the local taxpayer?



If you have any comments on this section of the draft policy, please provide them below:

- It's part of running the service and a part of the process.
- I think the admin fee should be the same as in the previous scenario, ie fixed and minimal say under £100.
- The policy seems clear (there are small typos from cutting and pasting eg 2 in 18.5). However, there is a requirement for the council (or whoever provides some or all of the deferred payment scheme service) to be effective and efficient. Agreement that this should be at no cost to the local taxpayer must not be a mandate for the council to pay itself at a rate it decides. There are also likely to be unknowns with any new change of this magnitude: costs and contingencies are likely to be higher initially and a blanket rule may penalise the early adopters.

Section 5: The Council's Support Planning process

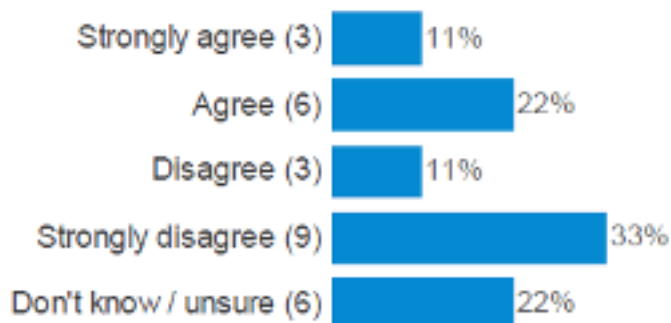
Following the new Care Act, our Support Planning policy statement focuses on the Council's legal duty to meet a person's eligible needs rather than provide specific services. This is a subtle but important change in emphasis, which will enable the Council to develop and review flexible support plans for each person.

We now emphasise that the way people are supported could vary over time - for example when their needs change, when new technology becomes more available, or when new approaches are developed. For example:

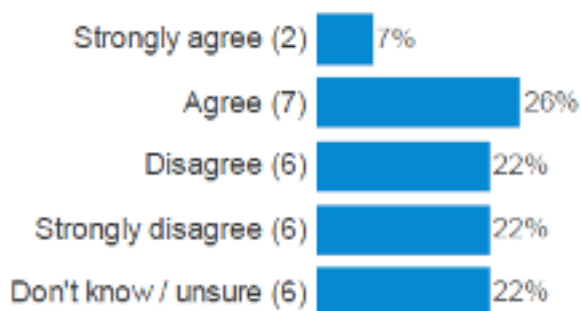
- Assessing night time care - identifying where we can use assistive technology equipment to reduce someone's dependence on night staff.
- Looking at issues such as rural isolation - clarifying when it is appropriate for the Council resources to pay for leisure activities rather than the person using their own money
- Clarifying when a single housing and support arrangement would be supported by the Council rather than a more cost effective shared housing arrangement.

[Click here to view more information on this section, what the policy is, and what it means.](#) It is helpful to read this before answering the questions below.

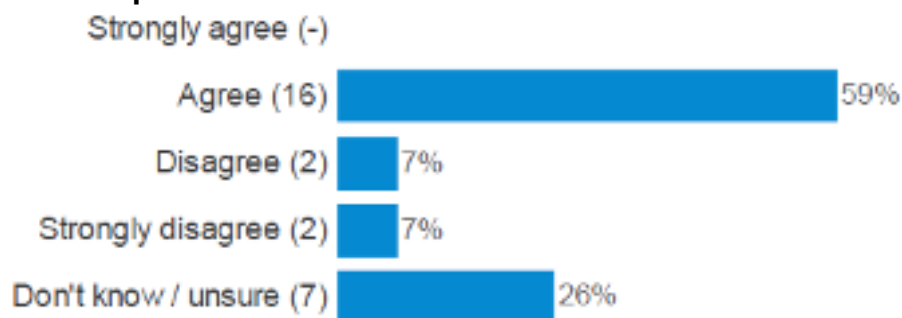
To what extent do you agree that the Council should maximise the use of assistive technology - particularly for support and care overnight?



To what extent do you agree that the Council should make the distinction between 'reducing and preventing social isolation' and 'leisure activities that the person pays for themselves'? (For example, attending a day care centre can reduce isolation, in which case we wouldn't need to fund an evening swimming class)



To what extent do you agree that the Council should only consider single housing and support arrangements where shared housing would not meet the person's specific needs?



If you have any comments on this section of the draft policy, please provide them below:

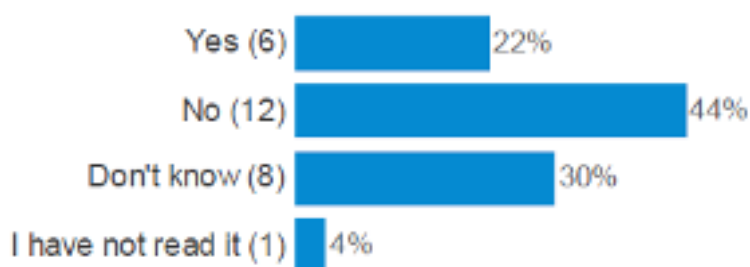
- Requirements for support at night often tips the balance between someone being able to remain in their own home or not. Addressing a person's health and wellbeing needs can make a difference in their ability to function more independently particularly during day time hours. Shared housing has its benefits for some but not all - this needs careful assessment in order to improve the life of an individual.
- 1. Assistive technology - So long as there is a cost benefit without introducing adverse levels of risk. 2. "Only consider single housing and support arrangements where shared housing would not meet the person's specific needs" - Not sure I understand this area enough to comment. Shared accommodation would still need private space and controls in place. I wouldn't want to share in the private sector and wouldn't 'rent a room in a house'. You don't know the other person, their moral standards, habits etc.
- Re the second question, if the person is already attending swimming that they pay for themselves but are isolated I do not think that they should have to give it up to pay for day care. The wellbeing requirement to prevent, delay or reduce needs escalating considers multiple factors including some associated with public health. We have concerns with disregarding factors when creating the support plan (such as "because the carer does it"). It is difficult to comment here on social isolation and a leisure activity that promotes physical and mental wellbeing such as swimming.
- It would be counterproductive to not allocate resources for the day centre and find the person couldn't swim because they had to fund day centre; or that the carer gave up swimming too. The policy relies on good support planning and agreement to joint assessments when appropriate – this will be a challenge for the council.

Section 6: The Adult Social Care Policy Framework

Our Adult Social Care Policy Framework consists of a number of rules that cover all the main duties established in the first phase of the national Care Act. In line with the legislation, some of the policy statements apply broadly to the population as a whole, whilst others are more specific and relate solely to people with care and support needs, and / or their carers.

[Click here to view the full Adult Social Care Policy Framework](#)

Did you find the "what does it mean for me" sections contained within each policy statement useful?



Please use the space below to explain your answer:

- Sadly these summaries don't replace the need to wade through all the rest.
- Enabled me to review during the survey so I feel confident to answer the questions.
- I think it needs to be more specific and give clear examples. Currently it is a little vague.
- It was very helpful to see the sections split into person with care needs / carer / professional.

If you have any further comments on the policy framework as a whole, please provide them below:

- My first comment is I only came across this consultation by accident and I think most people will not know about it, thus making it undemocratic and council biased. My second comment, I think the government should be responsible for paying for care so that it is uniform thru out the country and is not varied by any particular council.
- The policy framework was straightforward. There were times when changes to existing were helpfully highlighted and perhaps a summary highlighting these may be beneficial. The policy regarding market shaping made esuggestions including new CIC, ULOs etc potentially if required. We would be willing to engage with the council from a providers perspective if this would be helpful, to highlight existing barriers. (Initial investment requirements, impact of procurement process and delays, TUPE, cash flow and return on investment, risk).

- I didn't understand the survey, it was too hard
- I didn't find this easy to fill in, I needed support
- I did not find this easy to fill in, I needed support.
- No.
- The survey was hard.
- Questions not clear to read.
- I did not understand the survey
- I didn't understand the survey.
- I didn't understand the survey. As a person with learning disabilities the survey was hard to understand.
- No.
- Haven't got a clue!
- I didn't understand the survey.
- I didn't understand the survey.
- I didn't understand the survey, it's not said very clearly.